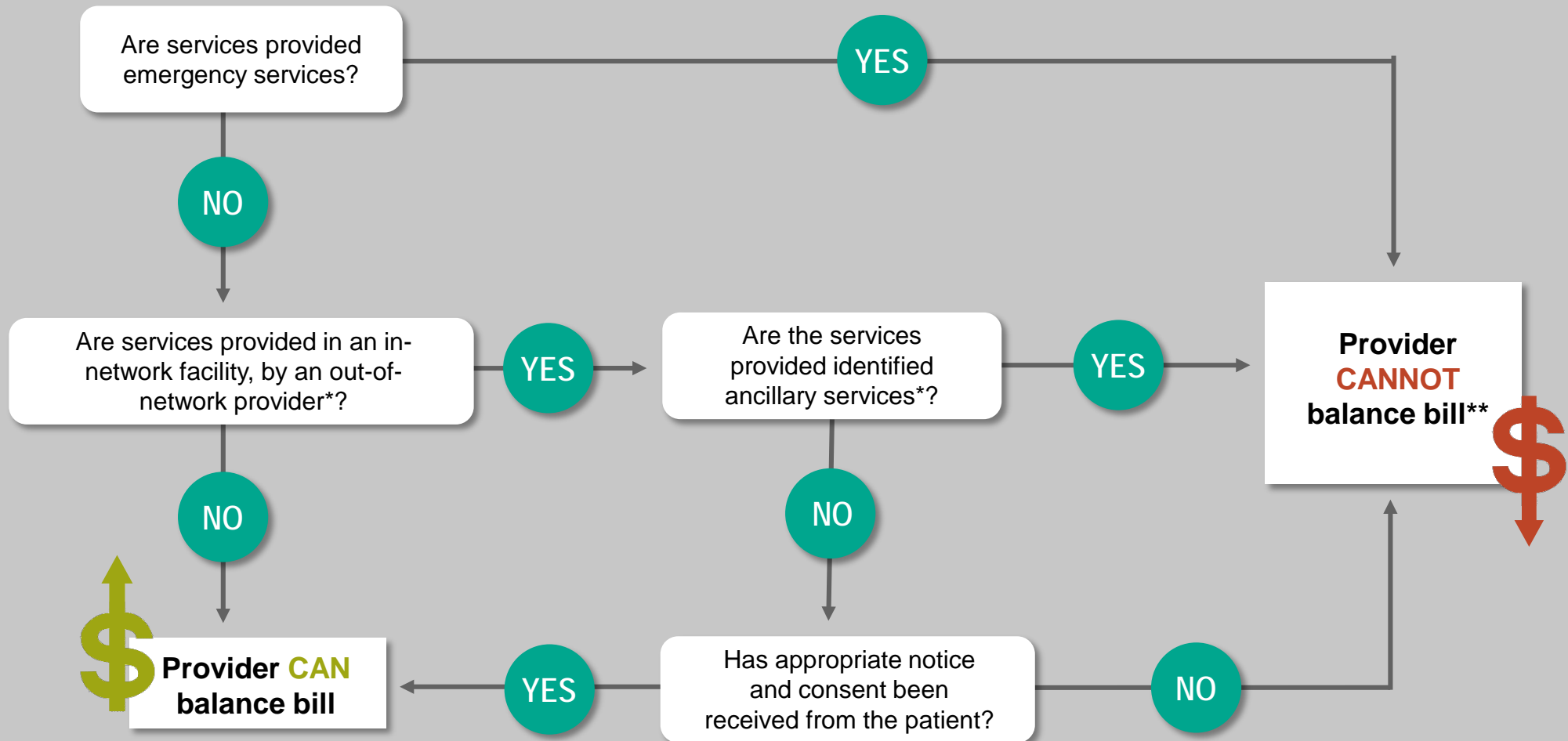


Balance Billing for Healthcare Services

Can a Provider Balance Bill a Patient for Services?



* As defined in the Consolidated Appropriations Act of 2021 (P.L. 116-260).

** Providers who are prohibited from balance billing for certain services can initiate the Independent Dispute Resolution (IDR) process.

Note: If a patient receives air ambulance services by an out-of-network provider, that otherwise would have been covered if the air ambulance was in-network, the patient may only be responsible for the cost sharing requirements if the provider was in-network. The CAA does not address ground ambulance services.

Independent Dispute Resolution (IDR) Timeline

Providers who are Prohibited from Balance Billing for Certain Services can Initiate the IDR Process

Healthcare Service is Provided

Day 0: Provider received payment for services or notice of denial from health plan

Day 30: Either the healthcare provider or the health plan has up to 30 days after the initial payment or notice of denial to initiate the IDR process

Day 60: Once the IDR process is initiated, the provider and plan have up to 30 days for open negotiation

Day 64: After the open negotiation period ends, either party has up to 4 days to initiate the formal IDR process

Day 67: Once the formal IDR process is initiated, the parties have 3 days to select an arbiter

Day 73: If the parties do not select an arbiter, the Department of Health and Human Services has 6 days to select an arbiter

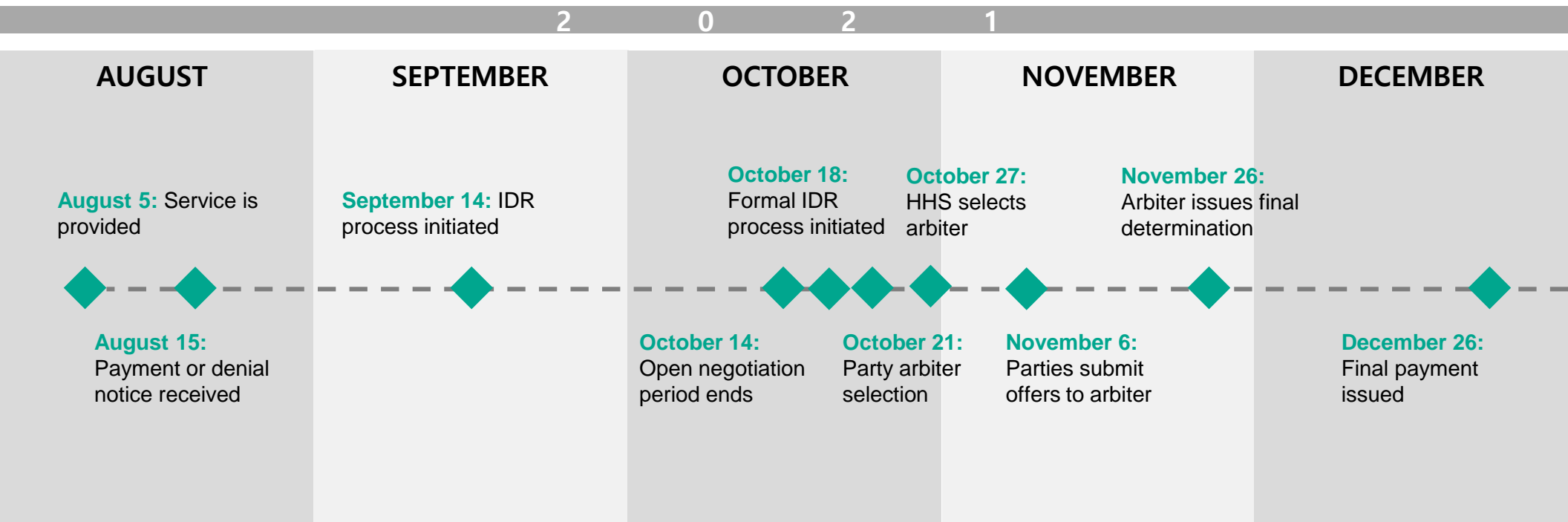
Day 83: Within 10 days of the arbiter being selected, the parties can submit offers and any additional information for consideration and review

Day 103: 30 days after being selected, the arbiter must issue the final determination

Day 133: Within 30 days of the final determination, final payment must be received

Independent Dispute Resolution (IDR) Timeline

Sample IDR Process Timeline



Description of Sample IDR Process Timeline

Prior to Day 0: Service is Provided.

Day 0: Provider received payment for services or notice of denial from health plan.

Day 30: Either the healthcare provider or the health plan has up to 30 days after the initial payment or notice of denial to initiate the IDR process.

Day 60: Once the IDR process is initiated, the provider and plan have up to 30 days for open negotiation.

Day 64: After the open negotiation period ends, either party has up to 4 days to initiate the formal IDR process.

Day 67: Once the formal IDR process is initiated, the parties have 3 days to select an arbitrator.

Day 73: If the parties do not select an arbitrator, the Department of Health and Human Services has 6 days to select an arbitrator.

Day 83: Within 10 days of the arbitrator being selected, the parties can submit offers and any additional information for consideration and review.

Day 103: 30 days after being selected, the arbitrator must issue the final determination.

Day 133: Within 30 days of the final determination, final payment must be received.